

Soreness of neck somewhat relieved by the leeches: patient feels rather better: pulse 96 and feeble: skin cool: tongue less dry. Complaints of soreness in the tumour of the cheek, which appears somewhat inflamed. 3d. General condition about as yesterday: tumour in the cheek a little more inflamed. A blister was ordered over the tumour: wine-why and beef-tea continued. 5th. Patient feels much better, and sits up in bed: pulse 92 and has more force: tongue moist and moderately furred. There is considerable swelling at the upper part of the neck on the right side and behind the veins of the jaw, with some tenderness: the tumour of the cheek continues hard and tender, but less painful than before the application of the blister. 7th. Swelling and tenderness of the neck somewhat diminished: fluctuation is perceptible in the tumour of the cheek: it was opened with a lancet, which gave issue to a drachm or more of dark-coloured purulent matter. Some oozing of blood took place after the escape of the matter, which was arrested by introducing within the lips of the wound a pencil of argent. nitrat. Wine-why and beef-tea continued.

During the nights of the 7th and 8th the patient was delirious; he gradually sank, and died on the 10th.

Autopsy.—The right internal jugular vein was thickened in its coats and adherent to the surrounding parts: when it was opened, it was found to be distended with purulent matter and shreds of fibrin. The inflammation of the vein extended from the base of the cranium down to the space just above its junction with the subclavian vein, where its cavity was entirely obliterated by adhesion of its opposite sides. No traces of inflammation were detected in any of the veins below. On laying open the congeries of veins constituting the tumour of the cheek, it was found to contain soft coagulated blood, but no pus. Four small white calculeous concretions, or phlebotomies, of a globular form, were found in it: they varied in size from the volume of half a pea to that of a large pin's head. On the left hemisphere of the cerebrum there was extensive effusion of concrete purulent matter between the arachnoid and the pia mater, along the course of the veins running over the anfractuosités, and in some places, extending between the convolutions. There was less extensive effusion of a similar character on the right hemisphere. A similar effusion was also observed on both surfaces at the cerebellum, and at the base of the cranium, between the arachnoid and the dura mater. A small portion of fibrin was also found in the right lateral sinus near its termination. No marks of inflammation or of suppuration were found in his lungs, liver or kidneys, or any of the articular cavities. The ligature had not come away from the artery during life; but it had become detached in laying out the corpse. The artery was entirely divided, and a pretty firm clot on each side of the division, obliterating nearly an inch of each portion of the vessel.

"The result of this case," Dr. Post observes, "was entirely unexpected and unusual. I am not aware that there is any case on record, in which the ligature of a large artery has been followed by inflammation of a corresponding vein, when the vein itself was not disturbed during the operation. In the present case, the sheath of the vessels was opened over the carotid artery, and the internal jugular vein was not exposed nor disturbed in any of its relations."

Remarkable Case of Volvulus and Strangulation of the Intestines within the Abdomen. By JAMES M. GORDON, M. D., of Lawrenceville, Ga. (*Southern Medical and Surgical Journal*, August, 1845.)—The subject of this case was a man 35 years of age, of vigorous health, who was attacked with the most excruciating pains in the abdomen, with partial remissions, attended with obstinate constipation, which resisted all means of relief, and the patient expired in intense agony thirteen days after the attack.

On *post-mortem* examination the ileum was found dark-red (almost black), which appearance extended through all the coats of the bowels and also to the mesentery. There was an intussusception of about an inch and a half in length, at about four inches above the termination of the ileum. So firmly had the coats of the intestine become agglutinated that they presented the appearance of a fleshy tumour, blocking up its entire caliber. It was also observed that the ileum had made a complete revolution upon itself, with the peritoneum as an axis, so as to strangulate a knuckle of intestine five inches in length. The first point of strangulation was immediately above the intussusception, and the second twelve inches

above the last. They were twisted around each other so as to form a *knot* which was with difficulty relieved after the morbid specimen had been removed from the body. The incarcerated noose of intestine presented an almost black colour, and was greatly distended with gas. About twenty inches of intestine were involved in the congestion. The points where the intestine passed around itself were of a dull-white colour, presenting a striking contrast with the surrounding parts.

On the mode of Operation, and Therapeutical application of Iodine and its Preparations. By THOMAS BARBOUR, M. D., Prof. of Obstetrics, &c., in Jackson Kemper College, St. Louis, (*Missouri Med. and Surg. Journal*, May, 1845.)—Dr. Barbour gives in this article the results of his experience with iodine and its preparations, and enumerates the various diseases in which he regards the remedy particularly valuable.

1. *Serofula.* If there be an article entitled to the appellation of specific, Dr. B. thinks it is certainly iodine in ordinary serofula, serofulous ophthalmia and white swelling. He employs in these diseases the solution of iodine with hydriodate of potassa, with the ointment of the same, the syrup of hydriodate of iron; and in the last named disease the tincture of iodine applied over the affected joint.

2. *Chronic visceral inflammations, indurations and enlargements.* In chronic inflammation, induration and enlargement of the spleen and liver, Dr. B. considers the following combination of great value: *R.*—Proto-iodide of mercury \mathfrak{zj} ; socotrine aloes \mathfrak{zss} ; extract of hyoscyamus \mathfrak{zj} .—*M.* Make into 24 pills, of which one may be given at first every night, then every other night.

3. *Diseases of the urinary organs.* Dr. B. has witnessed the happiest effects from the use of proto-iodide of mercury in chronic nephritis and cystitis, and in enlargement of the prostate.

4. *Diseases of the uterus.* In chronic inflammation, with induration and enlargement of the uterus, Dr. B. considers iodine especially valuable. He usually prefers the proto-iodide of mercury in combination with extract of cicuta and aloes. He places great confidence in the above combination as a means of cure of dysmenorrhœa. In amenorrhœa he particularly recommends the following combination: *R.*—Proto-iodide of mercury \mathfrak{zj} ; socotrine aloes, exsiccated sulphate of iron, gum myrrh, of each \mathfrak{zss} ; oil of savine gtt. xx. —*M.* Make into 24 pills, of which one may be given morning, noon, and night.

5. *Diseases of the chest.* Dr. B. has found iodine of great value in most of the chronic diseases of the chest, particularly in chronic bronchitis, asthma, incipient phthisis, pneumonia with hepatization, and chronic pleuritis with effusion. In chronic bronchitis he gives the solution of iodine with hydriodate of potassa in combination with an expectorant syrup made by boiling squill, seneka and lobelia, of each one ounce in half a gallon of water down to a pint; then straining, and adding to the infusion a pint of honey and again boiling down to a pint. In incipient phthisis he administers the aqueous solution of iodine, with tincture of digitalis, thrice daily; extract of cicuta at night, and nitric acid in infusion of wild cherry bark as a tonic; with counter-irritation with croton oil. In pneumonia, with hepatization, and pleuritis with effusion, he regards the following combination of great value: *R.*—Hydriodate of potassa, pulverized squill and extract of cicuta, of each \mathfrak{zss} ; ipecac. gr. xv. Make into 20 pills, of which one should be given every four or six hours.

7. *Chronic Rheumatism.* In this he recommends the following combination as of great value. Hydriodate of potassa \mathfrak{zj} ; pulv. colchicum \mathfrak{zj} ; extract of stramonium \mathfrak{zss} . Make into 30 pills, of which one should be given three times a day.

8. *Syphilis.* In secondary syphilis Dr. B. believes that no remedy is comparable to the proto-iodide of mercury.

9. *Ozena.* Dr. B. considers the iodine a valuable means of cure in this disagreeable affection. He gives the aqueous solution internally and injects the same diluted with 4 or 5 pints of water into the nasal passages.

10. *Chronic cutaneous diseases.* In these Dr. B. thinks iodine affords us a much better prospect of success than any other remedies.

In *trinea capitis* he places great confidence in the tincture of iodine as recommended by Dr. Graves.

In *indolent ulcers, whether simple, serofulous or syphilitic.* Dr. B. prefers the tincture